APPLICATION DATA SHEET

Application Information

Application Type:: Regular

Subject Matter:: Utility

Sequence submission?:: Paper

Computer Readable Form

(CRF)?:: Yes

Number of copies of CRF:: 1

Title:: MODIFIED POLYPEPTIDES STABILIZED IN A DESIRED CONFORMATION AND

METHODS FOR PRODUCING SAME

Attorney Docket Number:: CBN-002CP

Request for Early Publication?:: No Request for Non-Publication?:: No

Total Drawing Sheets:: 12

Small Entity?:: Yes

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Timothy

Middle Name:: A.

Family Name:: Springer City of Residence:: Newton

State or Province of Residence:: MA

Country of Residence::US

Street of mailing address:: 36 Woodman Road

City of mailing address::Newton

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing

Address:: 02167

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Motomu
Family Name:: Shimaoka
City of Residence:: Brookline

State or Province of

Residence:: MA

Country of Residence::US

Street of mailing address:: 73 Longwood Avenue

City of mailing address:: Brookline

State or Province of mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing

Address:: 02446

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Chafen
Family Name:: Lu

City of Residence:: Newton

State or Province of Residence. MA

Country of Residence::US

Street of mailing address:: 36 Woodman Road

City of mailing address::Newton

State or Province of mailing address:: MA

Country of mailing address:: US Postal or Zip Code of mailing

Address:: 02167

Correspondence Information

Correspondence Customer Number::

000959

Representative Information

Representative Customer	000959
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-provisional	60/229,700	09/01/00

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing

address::

Country of mailing address::

Postal or Zip Code of mailing

Address::